# 4031153996

FE6AN026

FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED 7

2014 JAN 22 AM 10: 40

OFFICE USES OF LETTER

NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typin over the lines.	g, type 12	FE4M5	]
Montgomery Cardio	vascular Associates PC	PAC			
ADDRESS (number and street of the characteristics)  Check if different than previously reported. (ACC)  2. FEC IDENTIFICATION	Montgomery		<u> </u>	AL 36124	ZIP CODE A
C 00280107	3.	IS THIS X N	EW I) <b>OR</b>	AMENDED (A)	
4. TYPE OF REPOR (Choose One)  (a) Quarterly Reperts  April 15 Quarterly Re July 15 Quarterly Re October 15 Quarterly Re January 31 Year-End Re July 31 Mid- Report (Non- Year Only) (I	port (Q1)  port (Q2)  port (Q3)  port (YE)  Year election MY)  Report  Report  Report  A  12-Day PRE-Election Report for the:  POST-Election Report for the:	Aar 20 (M3)  Jor 20 (M4)  Primary (12P)  Convention (1	2C)	Aug 20 (M8) Sep 20 (M9) Oct 20 (M10) General (12G) Special (12S)  Runoff (30R)	Nov 20 (M11) (Non-Election Year Only)  Dec 20 (M12) (Non-Election Year Only)  Jan 31 (YE)  Runoff (12R)  in the State of  Special (30S)  in the State of
5. Covering Period	10 / 01 / 201	3 through	12	31 / 201	3
I certify that I have exami Type or Print Name of Tre	ned this Report and to the best easurer Rick Roney	of my knowledge and b	elief it is true, o	correct and complet	e.
Signature of Treasurer	Rich Rome	tion may subject the same	Date	<u>p≕:25 - −7</u>	2014
Office Use Only	, erroneous, or incomplete informa	mon may subject the pers	on signing this P	FEC	FORM 3X ev. 12/2004

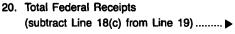
## SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)		Page 2
Write or Type Committee Name		
Montgomery Cardiovascular Associ	ates PC PAC	
Report Covering the Period: From:	0 ' 01 ' 2013 T	o: 12 ' 31 ' 2013
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand  January 1,  2013		12,170.97
(b) Cash on Hand at  Beginning of Reporting Period	12,171.67	
(c) Total Receipts (from Line 19)	.31	4.21
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	12,171.98	12,175,18
7. Total Disbursements (from Line 31)	.07	3.27
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	12,171.91	12,171.91
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
Debts and Obligations Owed BY     the Committee (Itemize all on     Schedule C and/or Schedule D)		
This committee has qualified as a multic	andidate committee. (see FEC FORM 1M)	
<del></del>	For further information contact:	
	Federal Election Commission 999 E Street, NW Washington, DC 20463	
	Toff Free 800-424-9530 Local 202-694-1100	

#### **DETAILED SUMMARY PAGE**

of Receipts FEC Form 3X (Rev. 06/2004) Page 3 Write or Type Committee Name Montgomery Cardiovascular Associates PC PAC M√ M 12 31 2013 10 01 2013 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)..... (ii) Uniternized ..... (iii) TOTAL (add Lines 11(a)(i) and (ii).....▶ (b) Political Party Committees ..... (c) Other Political Committees (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) ..... 12. Transfers From Affiliated/Other Party Committees..... 13. All Loans Received ..... 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... 17. Other Federal Receipts (Dividends, Interest, etc.)..... 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3)..... (b) Levin Funds (from Schedule H5) ....... (c) Total Transfers (add 18(a) and 18(b)).. Total Canainta (add Lines 11/d)

19.	iolai neceipis (add Lines 11(d),	
	12, 13, 14, 15, 16, 17, and 18(c))▶	



.31	4.

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

**COLUMN A COLUMN B** II. Disbursements **Total This Period** Calendar Year-to-Date 21. Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4) Federal Share ..... (ii) Non-Federal Share..... (b) Other Federal Operating Expenditures ..... (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ............. ▶ 22. Transfers to Affiliated/Other Party Contributions to Federal Candidates/Committees and Other Political Committees....... 24. Independent Expenditures 26. Loan Repayments Made..... (a) Than Political Committees ..... (b) Political Party Committees ..... (c) Other Political Committees (such as PACs)..... (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))........... ▶ .07 3.27 29. Other Disbursements ..... 30. Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity (from Schedule H6) (i) Federal Share ..... (ii) "Levin" Share..... (b) Federal Election Activity Paid Entirely With Federal Funds ..... (c) Total Federal Election Activity (add ... Lines 30(a)(i), 30(a)(ii) and 30(b)).... ▶ 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 5 COLUMN A III. Net Contributions/Operating Ex-COLUMN B **Total This Period** Calendar Year-to-Date penditures 33. Total Contributions (other than loans) (from Line 11(d), page 3) ..... 34. Total Contribution Refunds (from Line 28(d)) ..... 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) ..... 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .......▶ 37. Offsets to Operating Expenditures (from Line 15, page 3)..... 38. Net Operating Expenditures (subtract Line 37 from Line 36) ......



Regions Bank Norman Bridge 3720 Norman Bridge Road Montgomery, AL 36105

### 



00184330 01 AT 0.381 001 MCA PAC ATTN: RICK RONEY PO BOX 241587 MONTGOMERY AL 36124-1587

#### ACCOUNT #

001
27
0

Cycle **Enclosúres** -Page

1 of 2

#### **BUSINESS INTEREST CHECKING**

October 1, 2013 through December 31, 2013

Beginning Balance	\$12,171.67		Minimum Daily Balance	\$12,171
Deposits & Credits	\$0.00	. +	Average Monthly Statement Balance	\$12,171
Net Interest Earned	\$0.24	+	Annual Percentage Yield Earned	0.01%
Withdrawals	\$0.00	-	Interest This Period	\$0.31
Fees	\$0.00	-	Average Collected Balance	\$12,171.75
Autematic Transfers	\$0.00	+	2013 YTD Interest	\$1.21
Checks	\$0.00	_	2013 YTD Federal Withholding Tax	\$0.27
Ending Balance	\$12,171,91			•

10/31	Interest Payment		0.10
10/31	Federal Withholding Interest		0.02
11/29	Interest Payment		0.10
11/29	Federal Withholding Interest	•	0.02
12/31	Interest Payment	•	0.11
12/31	Federal Withholding Interest	•	0.03

	der	<b>EDAILY BALAN</b>	ICE SUMMARY		
Date	Balance	Date	Balance	<u>Date</u>	Balance
10/31	12,171.75	11/29	12,171.83	12/31	12,171.91

THE FOLLOWING CHANGE TO YOUR PRICING SCHEDULE WAS EFFECTIVE AS OF OCTOBER 1. 2013: THE TERM "LEDGER BALANCE" HAS BEEN CHANGED TO "CURRENT POSTED BALANCE". IN **COMING MONTHS, THE TERM "CURRENT POSTED BALANCE" OR "POSTED BALANCE" WILL ALSO** BE USED ANYWHERE ELSE "LEDGER BALANCE" IS NOW USED. THIS WORDING CHANGE WILL NOT AFFECT THE WAY WE ADMINISTER YOUR ACCOUNT OR PROCESS YOUR TRANSACTIONS.



Regions Bank Norman Bridge 3720 Norman Bridge Road Montgomery, AL 36105



MCA PAC ATTN: RICK RONEY PO BOX 241587 MONTGOMERY AL 36124-1587

#### **ACCOUNT #**

Cycle Enclosures Page

	1,7	:' '	( )
•			001
			27
		_	0 of 2

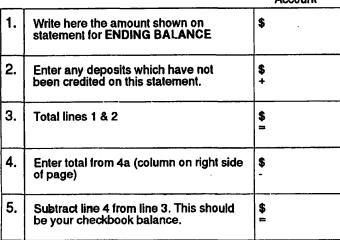
For all your banking needs, please call 1-800-REGIONS (734-4667). or visit us on the Internet at www.regions.com.

Thank You For Banking With Regions!



#### **Easy Steps to Balance Your Account**

#### Checking Account



4a List any checks, payments, transfers or other withdrawals from your account that are not on this statement.

Check No.	Amount	
	\$	
	\$	]
	\$	
	\$	
	\$	
	\$	7
	\$	
	\$	
	\$	
	\$	
	\$	
-	\$	
-	\$	
	\$	
Total Enter in Line 4 at Left	\$	

The law requires you to use "reasonable care and promptness" in examining your bank statergent and any checks sent with it and to report to the Bank an unauthorized signature (i.e., a forgery), any alteration of a check, or any unauthorized endorsement. You must report any forged signatures, alterations or forged endorsements to the Bank within the time periods specified under the Deposit Agreement. If you do not do this, the Bank will not be liable to you for the losses or claims arising from the forged signatures, forged endorsements or alterations. Please see the Deposit Agreement for further explanation of your responsibilities with regard to your statement and checks. A copy of our current Deposit Agreement may be requested at any of our branch locations.

> Summary of Our Error Resolution Procedures In Case of Errors or Questions About Your Electronic Transfers Telephone us toll-free at 1-800-734-4667 or write us at Regions Electronic Funds Transfer Services Post Office Box 413 Birmingham, Alabama 35201

Please contact Regions as soon as you can, if you think your statement is wrong or if you need more information about a transfer listed on your statement. We must hear from you no later than sixty (60) days after we sent the FIRST statement on which the problem or error appeared.

Tell us your name and account number.

(2) Describe the error or the transfer you are unsure about and explain as clearly as you cae why you believe it is an error or why you need more

(3) Tell us the dollar amount of the suspected error.

If you tell us verbally, we may require that you send us your complaint or question in writing within ten (10) business days.

We will determine whether an error occurred within ten (10) business days after we hear from you and will correct any error promptly. If we need more time, however, we may take up to forty-five (45) days to investigate your complaint or question (ninety (90) days for POS transactions or for transfers initiated outside of the United States). If we decide to do this, we will credit your account within ten (10) business days for the amount you think is in error, if, after the investigation, we determine that no bank error occurred, we will debit your account to the extent previously credited. If we ask you to put your complaint in writing and we do not receive it within ten (10) business days, we may not credit your account.

New Accounts- If an alleged error occurred within thirty (30) days after your first deposit to your account was made, we may have up to ninety (90) days to investigate your complaint, provided we credit your account within twenty (20) business days for the amount you think is in error. If we decide there was no error, we will send you a written explanation within three (3) business days after we finish our investigation. You may ask for copies of the documents that we used in our investigation.

FOR QUESTIONS CONCERNING THIS STATEMENT OR FOR VERIFICATION OF A PREAUTHORIZED DEPOSIT, PLEASE CALL THE PHONE NUMBER ON THE REVERSE SIDE OF THIS STATEMENT OR VISIT YOUR NEAREST REGIONS LOCATION.

ADJ - Adjustment

RI - Return Item

CR - Credit

SC - Service Charge FWT - Federal Withholding Tax OD - Overdrawn

\*Break in Number Sequence

EB - Electronic Banking

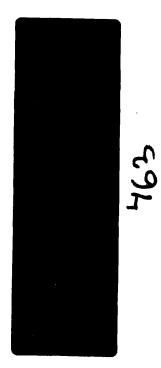
NSF - Nonsufficient Funds

APY - Annual Percentage Yield



02 1M \$ 000.550 0004272682 JAN14 2014 WAILED FROW ZIP CODE 36101

RECEIVED 2014 JAN 22 AM 10: 40 FEC MAIL CENTER



Montgomery Cardiovascular Associates, P.C. P.O. Box 241587

Montgomery, Alabama 36124-2398

(8/2013)

## **Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS** The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt Hand Delivered** Postmarked USPS First Class Mail Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS Priority Mail Postmarked USPS Priority Mail Express** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office **Date of Receipt or Postmarked** Other (Specify):